

EXHIBIT 41

Briones Case Consultation Report



**DEPARTMENT OF DEFENSE
ARMED FORCES MEDICAL EXAMINER SYSTEM
115 PURPLE HEART DRIVE
DOVER AFB, DE 19902**

MCMR-MEI

CASE CONSULTATION

DATE: 24 JAN 13

ACCESSION NUMBER: C533-12

NAME: Williams, Derek

AUTOPSY NUMBER: 11-02791

**CONTRIBUTOR: SSA Richard B. Marx
FBI
Laboratory Division-Evidence Response Team Unit
2501 Investigation Parkway
Quantico, VA 22135**

CAUSE OF DEATH: Sickle Cell Crisis

MANNER OF DEATH: Homicide

MATERIALS REVIEWED: Reviewed FBI case #282A-MW-2501949 including the investigative report, initial autopsy report, revised autopsy report, toxicology report, expanded toxicology report, medical records, DVD of video and audio of rear of squad car and attempted live saving measures, birth records, medical records, Hyoid bone radiographic studies and consultation report, police report, photographs from the scene, and autopsy photographs.

SUBMITTED DIAGNOSIS: Sickle cell crisis, Homicide

PERTINENT FINDINGS:

BACKGROUND:

On 7/6/2011 Mr. Derek Williams, a 22 year old African American male reportedly was arrested for armed robbery in Milwaukee, Wisconsin following a brief foot pursuit. Police reports indicate he was arrested with minimal incident and then placed in the back of a squad car. When placed in the back of the squad car, his hands were cuffed behind his back. While in back of the squad car, Mr. Williams reportedly complained that he could not breathe. He continued to call for help and eventually became unresponsive. Officers removed Mr. Williams from the squad car and initiated CPR. CPR was continued by police until the ambulance shows up and Emergency

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Medical Technicians performed their own life saving measures including an endotracheal tube and defibrillation. Mr. Williams was pronounced dead at the scene.

Later on 7/6/2011 an autopsy was performed at Milwaukee County Medical Examiner (Case # 2011---2791) which was signed out on 8/30/211 as Sickie Cell Crisis due to Sickie Cell Trait and Manner of death as Natural. Toxicology testing at the time of autopsy found the presence of Cannabinoids.

On 11/4/2011 the Milwaukee County District Attorney declined to file charges against the arresting officers.

On 4/30/2012 the Milwaukee Police Department determined that officers did not violate department rules, policies or procedures.

On approximately 9/22/2012 the Milwaukee County Medical Examiner's office revised it original manner of death from natural to homicide after viewing the police report and the squad car video of the arrest of Mr. Williams. Shortly thereafter the Milwaukee County District Attorney began to reopen the case via an inquest. Per report the Mayor and public called for a federal investigation.

On 10/08/2012 the US Attorney held a press conference announcing a federal investigation.

The Milwaukee division of the FBI requested a review of the autopsy findings and photos from the Armed Forces Medical Examiner System.

INITIAL AUTOPSY FINDINGS: Report dated: 8/30/2011

Cause of death: Sickie Cell Crisis

Due to: Sickie Cell

Manner of Death: Natural (see note: *Based on the information available at the time of this report, the decedent's interaction with police officers included a chase (running) and no physical altercation; therefore the manner of death is described as natural.*)

Toxicology: Cannabinoids detected in the blood

Other Significant Findings:

Under "Evidence of Medical Intervention" a fracture of the left side of the hyoid bone with minimal associated hemorrhage is described as "Most consistent with perimortem cricothyroid pressure application during resuscitation"

Under "Microscopic Description" all submitted sections are described as having "numerous blood vessels occluded by aggregates of red sickled red blood cells."

REVISED AUTOPSY FINDINGS: Report dated 9/18/2012

Cause of death: Sickie Cell Crisis

Due to: Flight From an Altercation With Police

Other Significant Conditions: Sickie Cell Trait

Manner of Death: Homicide

Toxicology: Cannabinoids detected in the blood

Other Significant Findings:

Under "Evidence of Injury", specifically "Blunt Forces Injuries of the Head and Neck" a fracture of the left side of the hyoid bone with slight associated hemorrhage is described.

Under "Microscopic Description" multiple submitted sections are described as having "numerous blood vessels occluded by aggregates of red sickled red blood cells.

REVIEW OF POLICE SQUAD CAR VIDEO AND INCIDENT REPORT: Review of the police squad car video and incident report did not change this office's opinion on cause and manner of death in this case.

REVIEW OF MEDICAL RECORDS:

Review of medical records reveals that Mr. Williams had a birth diagnosis of sickle cell trait and a chronic history of seasonal allergies. There was no evidence of a history of emergency room visits or hospitalizations as a result of previous sickle cell crisis.

REVIEW OF SUPPLEMENTAL EXPANDED TOXICOLOGY TESTING:

An expanded toxicology panel which included specifically looked for the presence of Synthetic Cannibinoids and Synthetic Cannibinoid Metabolites in the blood and the urine was run at NMS laboratories on 1/22/2012. Results of this testing revealed the following: cotinine, nicotine, Delta-9 THC, Delta-9 Carboxy THC, and Atropine. No synthetic cannibinoids or synthetic cannibinoid metabolites were detected in the blood.

OPINION and CONCLUSION: Based on the information available, the Office of the Armed Forces Medical Examiner disagrees with the submitted cause and manner of death and would assign the cause and manner in this case as **UNDETERMINED, UNDETERMINED**. This was concluded based on the following salient points upon review of this case.


1. After evaluation of the radiologic studies and the expert consultative report of the hyoid bone, the Office of the Armed Forces Medical Examiner disagrees with the initial and revised autopsy evaluation that the left side of the hyoid bone was fractured. The Office of the Armed Forces Medical Examiner agrees with the expert consultative report which stated that there were no distinct fractures of the hyoid bone.
2. After review of the microscopic slides, the Office of the Armed Forces Medical Examiner agrees with the diagnosis of vascular congestion, but cannot comment on the significance of the dysmorphic red blood cells within the vessels of multiple organs. No true/distinct thrombi with fibrin strands are identified in any of the histologic sections examined. The significance of dysmorphic red blood cells in post mortem histology is difficult to discern. The red blood cells may appear "sickled" or "dysmorphic" due to postmortem artifact or underlying disease. The exact cause of the dysmorphic red blood cells in this specific case is unknown based on the amount of information reviewed and the decedent's history of Sickle Cell Trait. The decedent's diagnosis of sickle cell trait should be considered as a contributing factor, but it is difficult to discern the exact cause of death based on the investigative,

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autopsy, and toxicology findings reviewed. Review of the medical records, autopsy reports and microscopic slides did not reveal a chronic pattern of sickle crises as may be evidenced by frequent hospitalizations or organ damage. Because death itself involves hypoxia, hypoperfusion, and other processes that could initiate sickling, differentiating whether sickling occurred in the immediate ante mortem period or in the postmortem period is difficult¹. Other circumstances such as exertion, physiologic stress, dehydration, altitude, asthma, and other comorbidities may cause red blood cells to appear dysmorphic even in cases of individuals who do not have history of sickle cell trait.² It can be difficult to discern whether the decedent's sickle cell trait or other factors may have caused red blood cells to appear dysmorphic in this case.

CONCLUSION: Based on the information available, the Office of the Armed Forces Medical Examiner disagrees with the submitted cause and manner of death and would assign the cause and manner in this case as **UNDETERMINED, UNDETERMINED.**

This case was reviewed at staff conferences on January 7, 2013 and January 24, 2013. Based on the available information, the consensus of the Office of the Armed Forces Medical Examiner is the cause of death and manner of death are best described as **UNDETERMINED, UNDETERMINED.**



Alice J. Briones, DO
Major, USAF, MC
Deputy Medical Examiner

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25 Jan 2013

¹ Sickle Cell Trait-Associated Deaths: A Case Series a Review of the Literature, Gladwin and Sachdev, *J Forensic Sci*, September 2011, Vo. 56. No. 5, pages 1352-1359

² Histology of Sickle Cell Trait; A Blinded Analysis, Thogmartin, Wilson, Palma, Igancio, and Pellam, *The American Journal of Forensic Medicine and Pathology*, Volume 30, Number 1, March 2009 pages 36-39

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